

Masters In Education Reimbursement Program

READ CAREFULLY AND PLEASE PRINT. Application deadline is June 30, 2001

1. Applicant's Name: _____
Last First Middle Initial
2. Mailing Address: _____
Street / Apt. # / P.O. Box
- City State Zip
- 3a. Home Phone: (_____) _____ 3b. Work Phone: (_____) _____
4. Applicant's Social Security Number: _____

Your Master's Degree (Note: If your answer is "Yes" to question #5 you are not eligible to apply for this program.)

5. Did you possess a master's degree, in any subject, prior to July 1, 1999? Yes _____ No _____
6. Have you received a Master's in Education or Master's in Teaching degree after June 30, 1999? Yes _____ No _____
7. If "yes," what is the date you received the master's degree? _____
8. Name of college or university that conferred the degree? _____
(Note: For you to be eligible, the institution which conferred the master's degree must be located in Washington State).
9. What is the total value of tuition reimbursement that you have received from your school, school district, or other public sources? Do not count private scholarships or student aid received through the college you attended. \$ _____

Your Teaching Credentials: Please check the appropriate boxes if you possess an endorsement, or have completed either a major or minor in any of the following areas. Check N/A if these categories do not apply to you.

10. ☐ Mathematics ☐ Science ☐ Biology ☐ Chemistry ☐ Earth Science ☐ Physics ☐ N/A

The School In Which You Teach (2000-2001 or 2001-2002) - must be a public elementary or secondary school in Washington

11. Name of school _____ 12. School District # _____
13. School Address _____
14. City: _____ 15. State: _____ 16. Zip code: _____
17. Grades and areas of specialization you will teach _____

18. The following documentation must be attached to this application (incomplete applications will be returned to the sender):

- A. A copy of a contract for current teaching service (2000-2001 school year) or for the next school year (2001-2002). You may substitute a letter from your school district (on official letterhead) confirming your teaching status. Teaching service must be at a rate of half-time or greater.
- B. If you possess any of the endorsements in question #10, please provide a copy of your certificate. In lieu of a copy of the endorsement certificate, you may substitute a letter from your school (on official letterhead) confirming your possession of one of these endorsements. If you do not possess an endorsement, but have a major or minor degree in one of these areas, please provide college transcripts confirming completion of the major or minor.
- C. An official college transcript or document confirming your receipt of either a Master's in Education or a Master's in Teaching degree and the date the degree was conferred.

19. Applicant's Statement: I certify that my answers to the questions on this application are true and correct.

Signature of Applicant

Date

FOR HECB OFFICE USE ONLY

Employment	_____	_____
Masters Degree	_____	_____
Endorsement	_____	_____
Priority	_____ Yes _____ No	
Initials	_____	Date _____ Status _____
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Send completed application to:

**Master's of Education Reimbursement
Program
Higher Education Coordinating Board
PO Box 43430
Olympia, WA 98504-3430**

